

MARYLAND DEPARTMENT OF THE ENVIRONMENT

LEAD PAINT RISK REDUCTION (MDE FORM 330) INSPECTION CERTIFICATE NO. 481277

MDE TRACKING NO. _____ MDE PROPERTY NO. _____ OWNER NAME _____

Street Address _____ Unit No. (e.g. StrNo: 2 A or StrNo: SFP) _____ City _____ County _____ Zip Code _____

The Maryland accredited lead inspector must mark an inspection category 1, 2, 3, 4, or 5 and mark the appropriate inspection method. Only ONE category and method are to be marked. The following attachments are required to be submitted with the certificate: Form B and Original Signed copy of Supervisor's Statement of Work for Visual Inspections, Form C and laboratory results for Dust Inspections and Form E for Lead-Free. The certificate shall be signed by the inspector who performed the inspection. Inspection certificates and all required attachments must be submitted to MDE within 10 days after the receipt by the inspector of dust sample results or within 10 days following a Visual Inspection. Copies of all inspection records shall be maintained for at least 5 years by the lead inspection contractors. Maximum penalties will be pursued by MDE for any falsified documentation that is received by MDE.

INSPECTION CATEGORIES

<input type="checkbox"/> 1. Lead Free	<input checked="" type="checkbox"/> 2. Full Risk Reduction	<input type="checkbox"/> 3. Modified Risk Reduction	<input type="checkbox"/> 4. Lead Safe (Qualified Offer - Certificate expires 24 months from the date inspected) OR <input type="checkbox"/> 5. Lead Safe (Not For Qualified Offer)
Methods	Methods	Methods	Methods
<input type="checkbox"/> A. One Time Only (Interior & Exterior) OR <input type="checkbox"/> B. Limited (Interior Only) Re-certification Required by ____/____/____	<input type="checkbox"/> A. Dust Inspection OR <input type="checkbox"/> D. Dust Inspection with Exterior Waiver Certificate expires 4/30/____ (Unless otherwise noted in local code) OR <input type="checkbox"/> E. Dust Inspection w/ Lead Free Exterior	<input type="checkbox"/> B. Visual Inspection OR <input type="checkbox"/> C. Visual Inspection with Exterior Waiver Certificate expires 4/30/____ (Unless otherwise noted in local code) OR <input type="checkbox"/> D. Visual Inspection w/ Lead Free Exterior	<input type="checkbox"/> A. Dust Inspection OR <input type="checkbox"/> B. Dust Inspection & Visual Inspection OR <input type="checkbox"/> C. Dust Inspection w/ Lead Free Exterior OR <input type="checkbox"/> D. Dust Inspection & Visual Inspection w/ Lead Free Exterior AND Verification that windows are lead-free or have been treated so friction surfaces are lead free.

PASSED Based on the findings of the attached inspection report(s), I certify that the **property/unit** meets the certification criteria at this time. *(circle property or unit as appropriate)*

FAILED Based on the findings of the attached inspection report(s), the **property/unit** fails to meet certification criteria at this time. *(circle property or unit as appropriate)*

I certify that I inspected the above listed **property/unit** on ____/____/____ at ____:____ a.m./p.m. under Title 6, Subtitle 8 of the Environment Article, Annotated Code of MD.

Inspector's Name _____ Inspector's Signature _____ Accreditation No. _____ Accreditation Expiration Date _____ Inspection Company Name _____ Accreditation No. _____ Accreditation Expiration Date _____